PROVIDER RESOURCES

A joint presentation on MCE provider resources.

Provider Resources

MCE Portals

Anthem

CareSource

MDwise

MHS

Questions

MCE WEB PORTALS

MCE Portals

Availity is a secure multi-health plan portal that will get you the information you need instantly. It can be accessed at www.availity.com and used to do the following:

- Eligibility and Benefits Inquiry
- Claim Submission and Inquiry
- Patient Care Summaries
- Care Reminders
- Online Remittances
- Request Prior Authorization through the Interactive Care Reviewer (ICR)
- Obtain status of an Authorization request through the ICR.

MCE Portals

The [CareSource Provider Portal](#) allows providers to save money and time.
Providers can access the following:
- Verify Member Eligibility
- Provider Membership Lists
- Clinical Practice Registry
- Provider Grievance
- Provider Appeals
- Submit Claims
- Claim Recovery Request
- Care Management Referral
- Provider Maintenance

MCE Portals

The myMDwise Provider Portal allows registered providers to:

- View member eligibility information.
- View member claims information.
- View member PMP information.
- View PMP patient rosters.
- Submit requests to Care Management/Disease Management programs.
- Request access to Quality Reports.
- Request access to Member Health Profiles.
- Contact MDwise Provider Relations securely online.

MCE Portals

Providers may register at mhsindiana.com to access MHS' Secure Provider Portal, where they can:

- Manage multiple practices under one account
- Check member eligibility
- View member panels
- View medical history and gaps in care
- Submit/check authorizations
- Submit/check/adjust claims
- View HEDIS Pay for Performance Reports
- Access explanation of payments
- Communicate electronically with MHS, with one business day response time
- Access electronic copies of manuals, presentations, training material and various forms
- Access free online health library with click & print patient education material
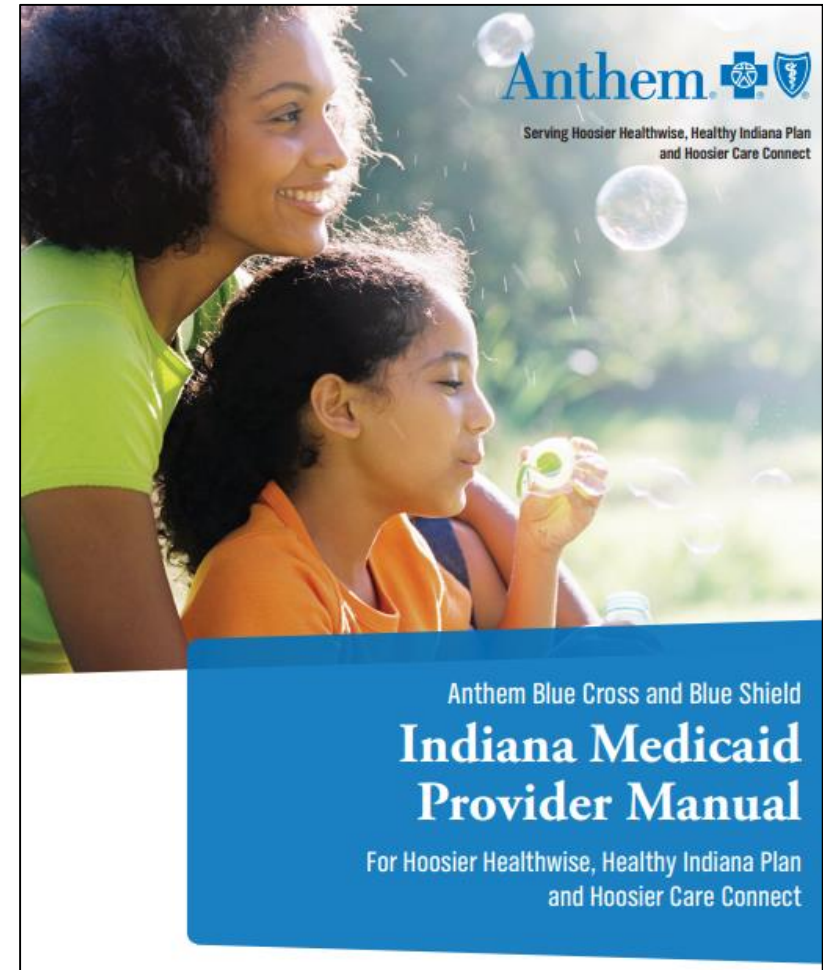
ANTHEM

Anthem

- Anthem's provider manual can be found on our website at the following link:

https://mediproviders.anthem.com/Documents/ININ_CAID_ProviderManual.pdf

Anthem

- Anthem's provider portal: Availity

https://apps.availity.com/availity/web/public.elegant.login?source=ABB

Anthem

Anthem BlueCross BlueShield

- Anthem forms can be found on our website at the following link:

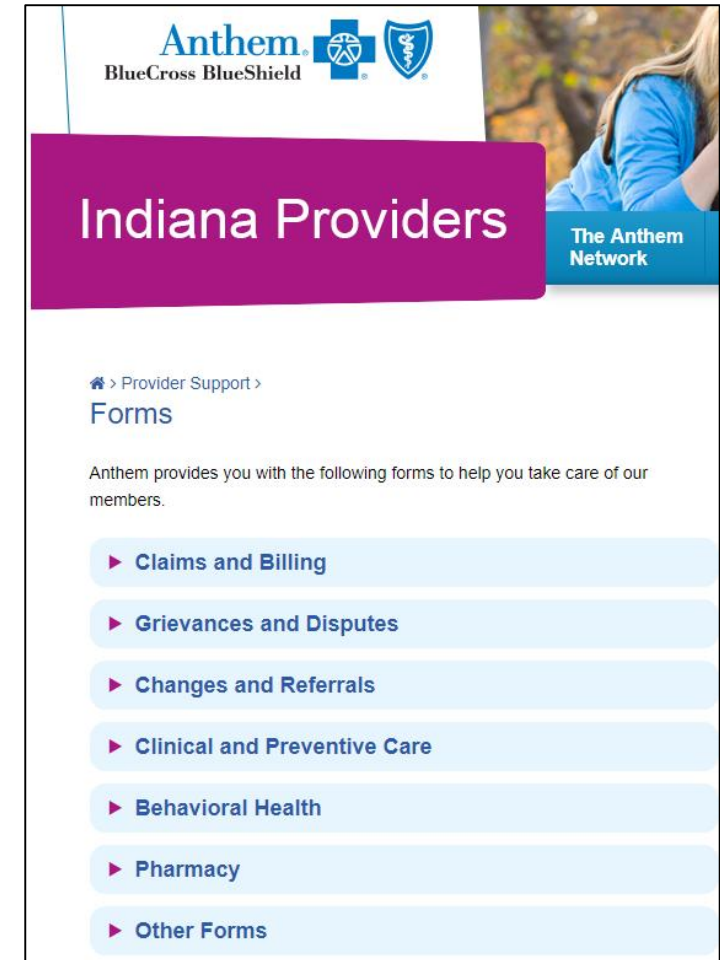https://mediproviders.anthem.com/in/pages/forms.aspx
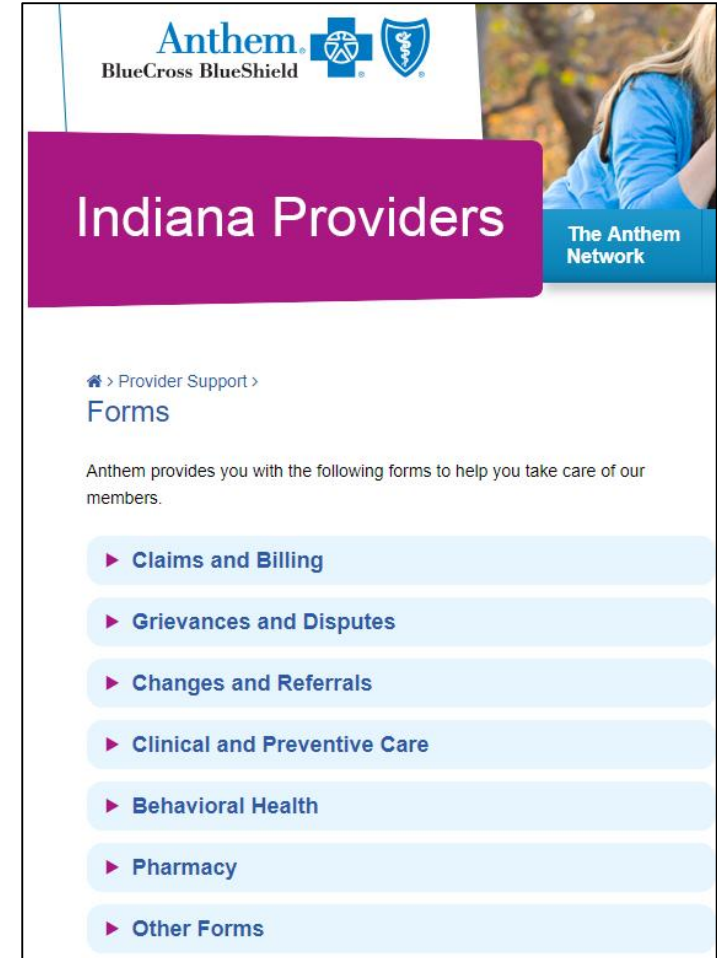
Anthem

Forms include:
- Claims and Billing
- Grievances and Disputes
- Changes and Referrals
- Clinical and Preventative Care
- Behavioral Health
- Pharmacy
- Other Forms

Anthem

Communications & Updates

Network Updates and Newsletters

▶ 2019

▶ 2018

▶ 2017

Communications and Updates

▶ 2019

▶ 2018

▶ 2017

▶ 2016

▶ 2015

▶ 2014

- Anthem communications & updates can be found on our website at the following link:

https://mediproviders.anthem.com/in/pages/communications-updates.aspx

Anthem

- Anthem's Find a Doctor tool can be found on our website at the following link:

https://www.anthem.com/health-insurance/provider-directory/searchcriteria

Anthem

- Anthem's Network Relations map can be found on our website at the following link:

https://mediproviders.anthem.com/Documents/ININ_CAID_PU_NetworkRelationsMap.pdf

Anthem BlueCross BlueShield

Indiana Medicaid Network Relations Map

Physical Health

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Northeast Region/IU Health
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1-317-306-0077

Southwest Region/Deaconess
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1-317-601-9474

West Central Region/St. Vincent
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Southeast Region
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Community Health
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1-317-287-6429

Out-of-state Providers/Franciscan
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1-317-517-8862

Indiana Provider Network Solutions
1-800-455-6805

Central Region

Marvin Davis	Tina Mason
marvin.davis@anthem.com	tina.mason@anthem.com
1-317-501-7251	1-463-201-3718
Marion County:	**Marion County:**
46280, 46240, 46250, 46256, 46236, 46216, 46235, 46229, 46220, 46205, 46226, 46218, 46201, 46219, 46203, 46239, 46107, 46259, 46237, 46227, 46204	46290, 46260, 46268, 46278, 46254, 46228, 46208, 46202, 46222, 46224, 46214, 46234, 46221, 46225, 46217, 46221, 46241, 46231, 46183, 46113
Johnson County:	**Johnson County:**
46162 (Needham), 46124 (Edinburgh), 46184 (New Whiteland), 46131 (Franklin)	46106 (Bargersville), 46181 (Trafalgar), 46142 and 46143 (Greenwood), 46164 (Nineveh)

www.anthem.com/inmedicaiddoc

CARESOURCE

CareSource

CareSource

- CareSource medical, pharmacy, reimbursement and administrative policies can be found on our website at the following link:

https://www.caresource.com/in/providers/tools-resources/health-partner-policies/medicaid/

HEALTH PARTNER POLICIES

CareSource maintains medical, payment and administrative policies for our health partners.

These policies are regularly reviewed, updated, withdrawn or added; and therefore, subject to change.

Please check often for updates to health partner policies.

Policies may vary by plan and/or state. Click the links to access policies for your member's plan.

The policies below are in PDF format. If you do not have Adobe Acrobat Reader, you may download it here.

Medical
Medical policies provide guidelines for determining medical necessity and appropriate care for approved benefits.

READ MORE

Pharmacy
Pharmacy policies provide guidelines for specialty drugs.

READ MORE

CareSource

- CareSource Forms can be found on our website at the following link:

https://www.caresource.com/in/providers/tools-resources/forms/medicaid/

FORMS

You may need to download **Adobe Acrobat Reader** to open these files.

Contracting and Practice Changes

- **New Health Partner Contract Form** – Submit this form if you are interested in becoming a CareSource provider. Need help? Refer to the **User's Guide for Completing New Health Partner Contract Form**. If you have additional general questions about the New Health Partner Contract Form, call Provider Services at **1-844-607-2831**.

- **Health Partner Change Request Form** – Submit this form to alert CareSource to a change within your practice.

Member-Related Forms

- **Interpreter Service Request Form** – Submit this form to request interpretation services for an upcoming appointment for a CareSource members.

- **Provider Referral For Member Education Form** – Submit this form to refer a member for education before requesting a primary medical provider (PMP) change.

- **Member Reassignment Form** – Submit this form to request a PMP change for the member.

- **Pre-Birth Selection Form** – Submit this form to request primary medical provider (PMP) assignment for a member's baby prior to birth.

- **PMP Change Request Form** – Submit this form to request a patient be moved on to your panel.

- **Potentially Medically Frail Referral Form** – Submit this form to refer a member for a medically frail assessment.

CareSource

CareSource®

- Below is a list of the type of forms:
- Contracting and Practice Changes
- Member Related Forms
- Pharmacy Prior Authorization Forms
- Medical Prior Authorization Forms
- Claims
- Disputes & Appeals
- Fraud, Waste and Abuse Reporting Form

CareSource

- CareSource Updates & Announcements can be found at the following link:

- https://www.caresource.com/in/providers/tools-resources/updates-announcements/medicaid/

UPDATES & ANNOUNCEMENTS

We strive to make partnering with us simple. We're aware things may change in the way we do business with you and want to communicate these changes to you in an efficient manner.

Visit the Updates & Announcements page frequently to find all the latest CareSource news. We share updates regarding:

- **Pharmacy information**, including our Preferred Drug Lists (PDLs)

- Medical, pharmacy, reimbursement and administrative **policies**

- Authorization requirements as communicated through network notifications below

The files below are in PDF format. If you do not have Adobe Acrobat Reader, you may download it **here**.

CareSource

CareSource Provider Portal:

https://providerportal.caresource.com/IN/User/Login.aspx?ReturnUrl=%2fIN%2f

Register for the Provider Portal

The Provider Portal makes it easier for you to work with us 24/7. It has critical information and tools to save your practice time. This helpful online tool is available for all CareSource Indiana plans.

If you are not already registered for the Provider Portal, please register here.

If you cannot remember your login, please utilize our "Forgot Password" feature to update your information and/or reset your password.

Step-by-Step Guidance:

Register for the Provider Portal
Reset Your Password

Browser Requirements for the CareSource Provider Portal

In order to ensure the highest security standards, the platform that CareSource utilizes for sending secure email will be undergoing security enhancements. This change will take effect on June 3, 2018. The security upgrades will result in the secure email portal only allowing a message recipient to access their messages using browsers that support TLS 1.2 or higher. For additional information, including which browsers support TLS 1.2 and a definition of TLS, please view the network notification related to this security enhancement.

Provider Login:

Username: _____ *
Password: _____ *

Forgot password?

Log In

CareSource®

- Provider Manuals:

https://www.caresource.com/in/providers/tools-resources/provider-manual/medicaid/

PROVIDER MANUAL

The provider manual is a resource for working with our health plan. It communicates policies and programs and outlines key information such as claim submission and reimbursement processes, authorizations, member benefits and more to make it easier for you to do business with us.

To view this file, you may need to download **Adobe Acrobat Reader**.

Provider Manual

Dental Provider Manual

The dental provider manual is a resource for our dental providers and serves as a link between your office and CareSource. It provides important information on topics such as covered services, services that require prior authorization, claim submission and more.

Dental Provider Manual

Updates & Announcements

We continually update information, both on a periodic and an as-necessary basis, and the content of the manual is subject to change without notice. We post updates through network notifications on the **Updates & Announcements** page. Please check this webpage often to stay current with all updates.

If you have any questions or would like more information, please call Provider Services at **1-844-607-2831**.

CareSource®

- Drug Formulary:

https://www.caresource.com/in/providers/tools-resources/drug-formulary/medicaid/

DRUG FORMULARY

HIP and HHW preferred drug lists (PDLs) can be accessed here. Click the link that corresponds to your member's plan:

- HIP Plus
- HIP Basic
- HIP State Plan Plus
- HIP State Plan Basic
- Hoosier Healthwise Package A
- Hoosier Healthwise Package C
- Hoosier Healthwise Package P

Formulary Search Tools

Our online drug lists can help you quickly look up medications for CareSource members. It's easy! You can find out if a medication is covered by searching alphabetically, by brand and generic name or by therapeutic class:

- HIP Basic and HIP State Plan Basic plans
- HIP Plus and HIP State Plan Plus plans
- Hoosier Healthwise Packages A, C and P

The following apps can also be downloaded on your Android or Apple device:

- MMIT Formulary
- ePocrates
- Fingertip Formulary

CareSource

- Quick Reference Materials:

https://www.caresource.com/in/providers/tools-resources/quick-reference-materials/medicaid/

QUICK REFERENCE MATERIALS

CareSource® wants to equip you to work with our health plan to provide the best service for our members. The following materials will help familiarize you with the CareSource Indiana Hoosier Healthwise (HHW) and Healthy Indiana Plan (HIP). You will find key information that will make it easier for you to do business with us and assist you in serving our members.

Quick Reference Guides

Below you will find quick reference guides and additional resources:

- Provider Quick Reference Guide
- EPSDT Program
- Community Mental Health Center FAQs

Improving Quality Scores

The following resources will help improve your patients' satisfaction and your quality scores:

- CAHPS Improvement Tips
- Pediatric CAHPS Tips
- Adult HEDIS Coding Guidelines
- Pediatric HEDIS Coding Guidelines
- Behavioral Health HEDIS Coding Guide

CareSource

CareSource®

Leadership

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Engagement Specialist
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Associations & Dental

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Contracting Managers – Hospitals/Large Health Systems

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Tenise.Hill@caresource.com

Mandy Bratton – South
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Medical Center

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Paula.Garrett@caresource.com
KentuckyOne, Norton, Baptist
Health Floyd
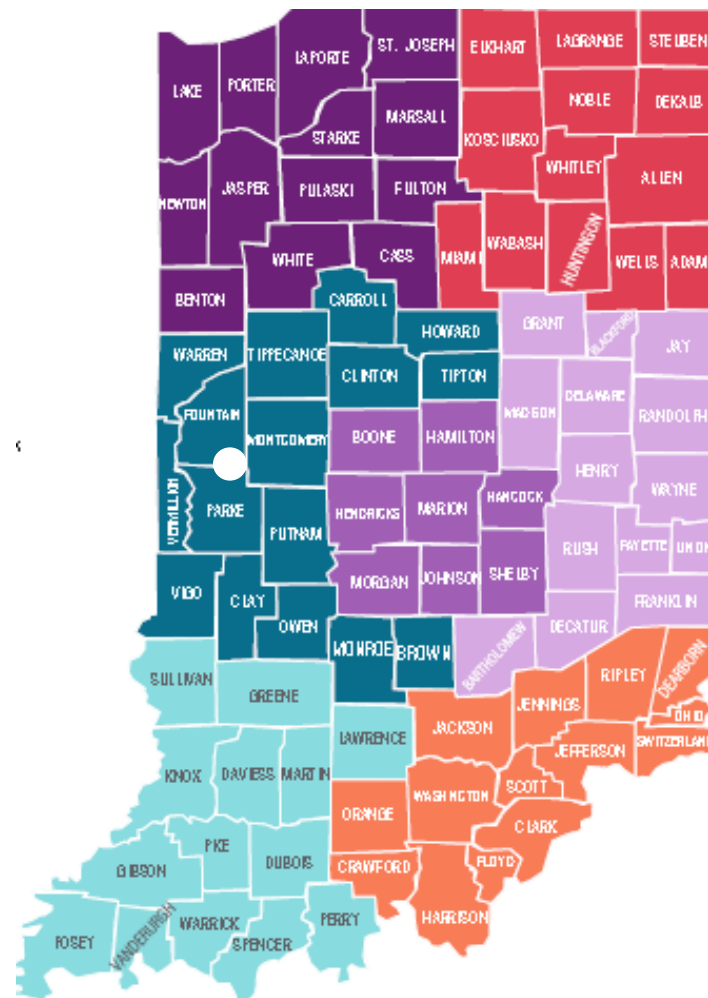
MDWISE

MDwise

www.mdwise.org

The MDwise Provider Page is a great resource for providers. From this page you can find the following features:

- Provider Manual
- Enrollment, Claims, and Provider Maintenance Forms
- Prior Authorization Lists
- Provider Portal Access
- News and Announcements
- Pharmacy Resources
- Quality Education Materials
- Continuing Education Materials
- Contact Guides

MDwise

MDwise forms can be found on the MDwise website at the following link:

https://www.mdwise.org/for-providers/forms

Provider Forms

Provider forms are available in the following categories:

Behavioral Health Forms

Care Management Forms

Claims Forms

Member Management Forms

Pharmacy Forms

Prior Authorization Forms

Provider Enrollment Forms

MDwise

The following forms can be found on the MDwise website:
- Health Provider Enrollment Form (Medical and Behavioral)
- Hospital/Ancillary Enrollment Form
- Provider Contract Inquiry Form (Medical and Behavioral)
- Non-Contracted Provider Set-up Form
- Provider Panel Update Form
- Provider Panel Add Request Form
- Universal Prior Authorization Form
- Claim Adjustment Request Form
- Claim Dispute Form
- Provider Refund Remittance Form

MDwise

MDwise News and Announcements can be found on the MDwise website at the following link: https://www.mdwise.org/for-providers by clicking *For Providers*.

MDwise ProviderLink Newsletters can be found on the MDwise website at the following link: https://www.mdwise.org/providerlink.

Welcome Providers

Welcome to the MDwise network. We value your participation and hope to keep you informed by providing easily accessible resources and updates here. Information about MDwise guidelines, requirements and policies and procedures can be found in the provider manual.

MDwise Quick Contact Guides
View our comprehensive quick contact guide includes contact information for Hoosier Healthwise and Healthy Indiana Plan.

View our comprehensive Prior Authorization Reference Guide that includes PA contact information for Hoosier Healthwise and Healthy Indiana Plan.

News and Announcements

August 5, 2019

Effective September 1, 2019, the 2017-2018 Valence Claims Portal will be retired (mdwportal.valence.care). Claim information for 2017-2018 claims can be accessed on the myMDwise portal at:

https://www.mdwise.org/for-providers/mymdwise-provider-portal

Payment Listings will not be available on the myMDwise portal. Please refer to your Clearinghouse, or paper copy.

For questions regarding this announcement or contracting, please call Provider Relations at **317-822-7300 ext. 5800**.

MDwise

myMDwise secure provider portal:
https://www.mdwise.org/for-providers/mymdwise-provider-portal

Welcome to myMDwise

The myMDwise provider portal allows registered providers to view member eligibility information securely online for both IHCP/Medicaid and MDwise Marketplace.

Included are the following online features:

- View member eligibility information.
- View member claims information.
- View member PMP information.
- View patient roster –*PMPs Only*.
- Submit requests for care management disease management programs.
- Request access to Quality Reports.
- Request access to Member Health Profile.
- Contact MDwise Provider Relations online.

Request for Access
Providers must complete the sign-up process to gain access. Users are required to create individual accounts. View our sign-up guide for additional help.

MDwise is Here to Help
If you have questions please contact MDwise Provider Relations at 317-822-7300, *ext. 5800*.

Supported browsers
myMDwise portal supports the latest 2 versions of the following major browsers:
Chrome | Internet Explorer | Firefox | Safari
Older browsers are supported on a limited basis and may display differently from the newer browsers. Organizations that depend on old versions of Internet Explorer may want to consider a dual browser strategy.

Provider Login

Username

Password

Submit

Providers:
Request a new account
Forgot your username or Password?

Valence Portal:
Claims Access

ePSS Tool:
The United States Preventive Services Task Force (USPSTF) develops evidence-based recommendations for clinical preventive services, and has created an Electronic Preventive Services Selector (ePSS) Tool for Primary Care Providers.

AHRQ ePSS
Find screening, counseling, and preventive medication services
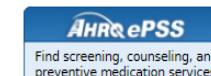
MDwise

The MDwise Provider Manual can be found on the MDwise website here:

https://www.mdwise.org/for-providers/manual-and-overview

Hoosier Healthwise and HIP Provider Manual and Overview

Hoosier Healthwise is a health plan for pregnant women and children up to age 18. **The Healthy Indiana Plan (HIP)** is a health plan for uninsured adults ages 19–64. The Hoosier Healthwise/HIP provider manual contains important information about Hoosier Healthwise, HIP and MDwise guidelines, requirements and policies and procedures.

We update the manual frequently, as necessary, due to program changes. You will be notified as any revisions or updates are added to the manual, which is always available on this website.

MDwise

MDwise pharmacy resources can be found on the MDwise website at: https://www.mdwise.org/for-providers/pharmacy-resources

Pharmacy Resources

Pharmacy benefits are managed through MedImpact. Please select the program listed below for more information on pharmacy resources.

Pharmacy Resources for Hoosier Healthwise
A health plan for children, pregnant women and low-income families.

Pharmacy Resources for Healthy Indiana Plan
A health plan for uninsured adults ages 19–64.

MDwise

The MDwise Quick Contact Guide, Provider Relations Territory Map, and DentaQuest Portal can all be found on the MDwise website here: https://www.mdwise.org/for-providers/contact-information

Contact Information

MDwise is available to work with providers of all types. MDwise has developed a comprehensive quick contact guide that includes contact information for Hoosier Healthwise and Healthy Indiana Plan.

For additional contact information:

- MDwise Provider Relations Territory Map
- Click here to access the DentaQuest provider portal.

MDwise
A McLaren Company

Provider Relations
Territory Map

Region 1
Paulette Means
pmeans@mdwise.org
317-822-7490

Region 2
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tward@mdwise.org
317-983-6137

Region 3
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Region 4
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Region 5
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Region 6
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Region 7
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317-308-7371

Region 8
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Region 9
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317-308-7345

Michelle Phillips
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(Home Health & Hospice)

Nichole Young, RN
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317-822-7509
(Behavioral Health - CMHCs, OTPs, IMDs, Residential)
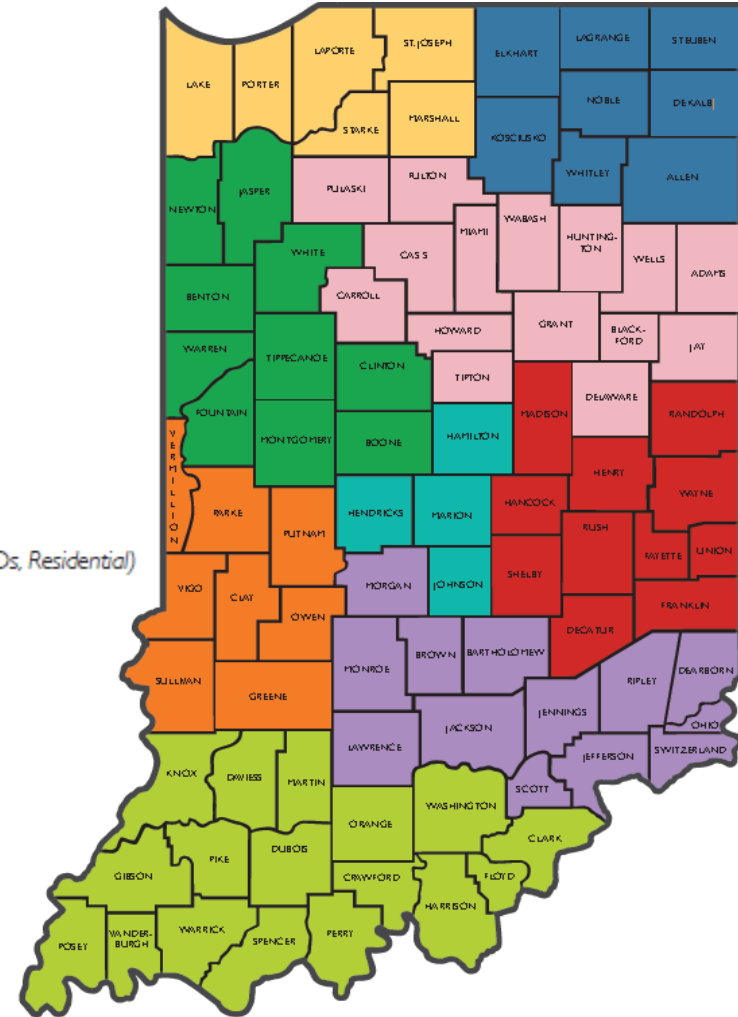
MANAGED HEALTH SERVICES (MHS)

MHS Clinical and Payment Policies can be found on the website at the following link:

https://www.mhsindiana.com/providers/resources/clinical-payment-policies.html

Clinical & Payment Policies

Clinical Policies

Clinical policies are one set of guidelines used to assist in administering health plan benefits, either by prior authorization or payment rules. They include but are not limited to policies relating to evolving medical technologies and procedures, as well as pharmacy policies. Clinical policies help identify whether services are medically necessary based on information found in generally accepted standards of medical practice; peer-reviewed medical literature; government agency/program approval status; evidence-based guidelines and positions of leading national health professional organizations; views of physicians practicing in relevant clinical areas affected by the policy; and other available clinical information.

All policies found in the MHS Clinical Policy Manual apply to MHS members. Policies in the MHS Clinical Policy Manual may have either a MHS or a "Centene" heading. MHS utilizes MCG criteria for those medical technologies, procedures or pharmaceutical treatments for which a MHS clinical policy does not exist. MCG is a nationally recognized evidence-based decision support tool. You may access the MCG SmartSheet(s)™ for Adult and Pediatric procedures, durable medical equipment and imaging procedures by logging into the secure provider portal or by calling MHS. In addition, MHS may from time to time delegate utilization management of specific services; in such circumstances, the delegated vendor's guidelines may also be used to support medical necessity and other coverage determinations. Other non-clinical policies (e.g., payment policies) or contract terms may further determine whether a technology, procedure or treatment that is not addressed in the Clinical Policy Manuals or MCG criteria is payable by MHS.

If you have any questions regarding these policies, please contact Member Services and ask to be directed to the Medical Management department.

CLINICAL POLICIES ⊕

PHARMACY POLICIES ⊕

Payment Policies

Health care claims payment policies are guidelines used to assist in administering payment rules based on generally accepted principles of correct coding. They are used to help identify whether health care services are correctly coded for reimbursement. Each payment rule is sourced by a generally accepted coding principle. They include, but are not limited to claims processing guidelines referenced by the Centers for Medicare and Medicaid Services (CMS), Publication 100-04, Claims Processing Manual for physicians/non-physician practitioners, the CMS National Correct Coding Initiative policy manual (procedure-to-procedure coding combination edits and medically unlikely edits), Current Procedural Technology guidance published by the American Medical Association (AMA) for reporting medical procedures and services, health plan

mhs

MHS Forms can be found on the website at the following link:

https://www.mhsindiana.com/providers/resources/forms-resources.html

Forms

All files are available as Adobe Acrobat PDF unless otherwise stated.

Provider Enrollment

- Behavioral Health Additional Forms: Provider Specialty (PDF), and HSPP Attestation (PDF)
- Behavioral Health Facility and Ancillary Demographic Form (PDF)
- Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect Hospital and Ancillary Credentialing Form (PDF)
- Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect Provider Enrollment Form (PDF)
- Non Contracted Provider Set-Up Form
- Provider Specialty Profile Form (PDF)

Claims

- Behavioral Health Informal Claim Dispute or Objection Form (PDF)
- Informal Claim Dispute or Objection Form (PDF)

Prior Authorization

- IHCP Prior Authorization Form (PDF) - Please call in prior authorization requests for prompt service.
- Late Notification of Services Submission Form (PDF)
- Prior Authorization Provider Handout (PDF)

Prior Authorization for Residential and Inpatient SUD Treatment

- Initial Assessment Form for Substance Use Disorder Treatment Admission (PDF)
- Reassessment Form for Continued Substance Use Disorder Treatment (PDF)
- Residential/Inpatient Substance Use Disorder Treatment Prior Authorization Request Form (PDF)

Pay for Performance

- Faxback Form (PDF)

Care Management

Managed Health Services

Below is a list of the type of forms:

- Behavioral Health Forms: Provider Specialty (PDF), and HSPP Attestation (PDF)
- Behavioral Health Facility and Ancillary Demographic Form (PDF)
- Behavioral Health Informal Claim Dispute or Objection Form (PDF)
- Initial Assessment Form for Substance Use Disorder Treatment Admission (PDF)
- Reassessment Form for Continued Substance Use Disorder Treatment (PDF)
- Residential/Inpatient Substance Use Disorder Treatment Prior Authorization Request Form (PDF)
- Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect Hospital and Ancillary Credentialing Form (PDF)
- Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect Provider Enrollment Form (PDF)
- Non Contracted Provider Set-Up Form
- Provider Specialty Profile Form (PDF)
- Informal Claim Dispute or Objection Form (PDF)
- IHCP Prior Authorization Form (PDF)
- Late Notification of Services Submission Form (PDF)
- Additional forms also available

MHS Provider Education & Training can be found using the link below.

https://www.mhsindiana.com/providers/resources/provider-training.html

Provider Education & Training

Provider Webinars

The Provider Webinar Series is designed to offer MHS providers and their office staff a monthly opportunity to learn from subject matter experts and ask questions about current topics and best practices. Registration is free and each webinar will be one hour in length.

We also offer free lunch and learns all over the state. Click here to sign up for the MHS 2019 Lunch Education Series.

Available Webinars *

August 15: The Ins and Outs of Billing

Please choose which webinar you would like to attend. You will receive login information the day prior to the webinar.

First Name *

Last Name *

Practice/Organization *

Email *

Managed Health Services

MHS Provider Newsletters are found on the website at the following link:

https://www.mhsindiana.com/providers/resources/newsletters.html

Newsletters

The Communicator

The Communicator focuses on new administrative-based information for our providers. It is released quarterly via email.

Provider Email Sign Up

Sign Up

2019

● Winter 2019 Newsletter (PDF)
● Spring 2019 Newsletter (PDF)

2018

● Winter 2018 Newsletter (PDF)
● Spring 2018 Newsletter (PDF)
● Summer 2018 Newsletter (PDF)
● Fall 2018 Newsletter (PDF)

2017

● Winter 2017 Newsletter (PDF)
● Spring 2017 Newsletter (PDF)
● Summer 2017 Newsletter (PDF)
● Fall 2017 Newsletter (PDF)

2016

● Winter 2016 Newsletter (PDF)
● Spring 2016 Newsletter (PDF)
● Summer 2016 Newsletter (PDF)
● Fall 2016 Newsletter (PDF)

If you would like this information in print, please contact Provider Services.

MHS Secure Provider Portal link:

https://www.mhsindiana.com/providers/login.html

Portal Login

Create your own online account today!

MHS offers you many convenient and secure tools to assist you. To enter our secure portal, click on the login/register button. A new window will open. You can login or register for a new account.

Creating an account is free and easy.

By creating a MHS account, you can:

- Verify member eligibility
- Submit and check claims
- Submit and confirm authorizations
- View detailed patient list

PORTAL TRAINING GUIDES ⊕

Please note that Clear Claim Connection does not provide an all inclusive listing of claim edits. MHS does utilize additional prepayment review edits in keeping with NCCI procedures and guidelines.

Registration Help

If you are having trouble with your registration, you may need to submit a non-par set-up form. Visit our Become a Provider page to get started. For further assistance, you can call Provider Services at 1-877-647-4848 or see our Account Registration Guide (PDF).

Vision and Dental Providers

Vision Provider Portal Login

Dental Provider Portal Login

Secure Provider Portal

Login/Register

Provider Email Sign Up

Sign Up

Managed Health Services

MHS Guides and Manuals link:

https://www.mhsindiana.com/providers/resources/guides-and-manuals.html

Guides and Manuals

Materials Order Form

We are proud to offer free materials and resources that can be used to help educate your staff, patients and partners about MHS and the programs we support.

REQUEST MATERIALS HERE ❯

Provider Manuals and Quick Reference Guides

- MHS Provider Manual (PDF), updated July 19, 2019
- Indiana Medicaid Provider Manual (PDF)
- MHS Provider Quick Reference Guide (PDF), effective June 1, 2019
- MHS Dental Provider Manual (PDF)
- MHS Plan Overview (PDF)
- MHS Provider Orientation (PDF)
- 2019 HEDIS Quick Reference Guide (PDF)

Managed Health Services

MHS Pharmacy Information link:

https://www.mhsindiana.com/providers/pharmacy.html

Pharmacy

MHS is committed to providing appropriate, high-quality, and cost-effective drug therapy to all MHS members. MHS works with providers and pharmacists to ensure that medications used to treat a variety of conditions and diseases are covered.

MHS covers prescription medications and certain over-the-counter (OTC) medications when ordered by an Indiana Medicaid enrolled MHS practitioner. The pharmacy program does not cover all medications. Some medications require prior authorization (PA) or have limitations on age, dosage, gender and maximum quantities. MHS encourages the use of electronic prescriptions or e-prescribing.

- Drug Search Tool
- Preferred Drug Lists
- Pharmacy Notifications
- Pharmacy Forms
- Pharmacy FAQs

Electronic Prescriptions
E-prescribing is an important element in improving patient safety and quality of patient care. Envolve Pharmacy contracted pharmacies can accept electronic prescriptions.

Managed Health Services

MHS Find a Provider can be found using the link below

https://www.mhsindiana.com/find-a-doctor/find-a-provider-home.html

Find a Provider

Find A Provider

Start Your Search

The MHS Provider Directory is a list of physicians, hospitals, pharmacies, dental and other healthcare providers that are available to you. Be sure to choose your correct plan when searching – Hoosier Healthwise, Healthy Indiana Plan (HIP) or Hoosier Care Connect.

If you are on Presumptive Eligibility (PE) for pregnant women or Children's Health Insurance Plan (CHIP), choose Hoosier Healthwise as your plan.

Vision Providers - click here for eye care providers.

Resources

![mhs logo]

Territory Map Link

https://www.mhsindiana.com/content/dam/centene/mhsindiana/medicaid/pdfs/BH_PH_Territory_map_2019.pdf

NORTHEAST REGION
Claims Issues: MHS_ProviderRelations_NE@mhsindiana.com
Chad Pratt, Provider Partnership Associate
1-877-647-4848 ext. 90454
ripratt@mhsindiana.com

CENTRAL REGION
Claims Issues: MHS_ProviderRelations_C@mhsindiana.com
Esther Cervantes, Provider Partnership Associate
1-877-647-4848 ext. 20947
Estherling.A.PimentelCervantes@mhsindiana.com

NORTHWEST REGION
Claims Issues: MHS_ProviderRelations_NW@mhsindiana.com
Candace Ervin, Provider Partnership Associate
1-877-647-4848 ext. 20187
Candace.V.Ervin@mhsindiana.com

SOUTHWEST REGION
Claims Issues: MHS_ProviderRelations_SW@mhsindiana.com
Dawn McCarty, Provider Partnership Associate
1-877-647-4848 ext. 20117
Dawnalee.A.McCarty@mhsindiana.com

SOUTHEAST REGION
Claims Issues: MHS_ProviderRelations_SE@mhsindiana.com
1-877-647-4848
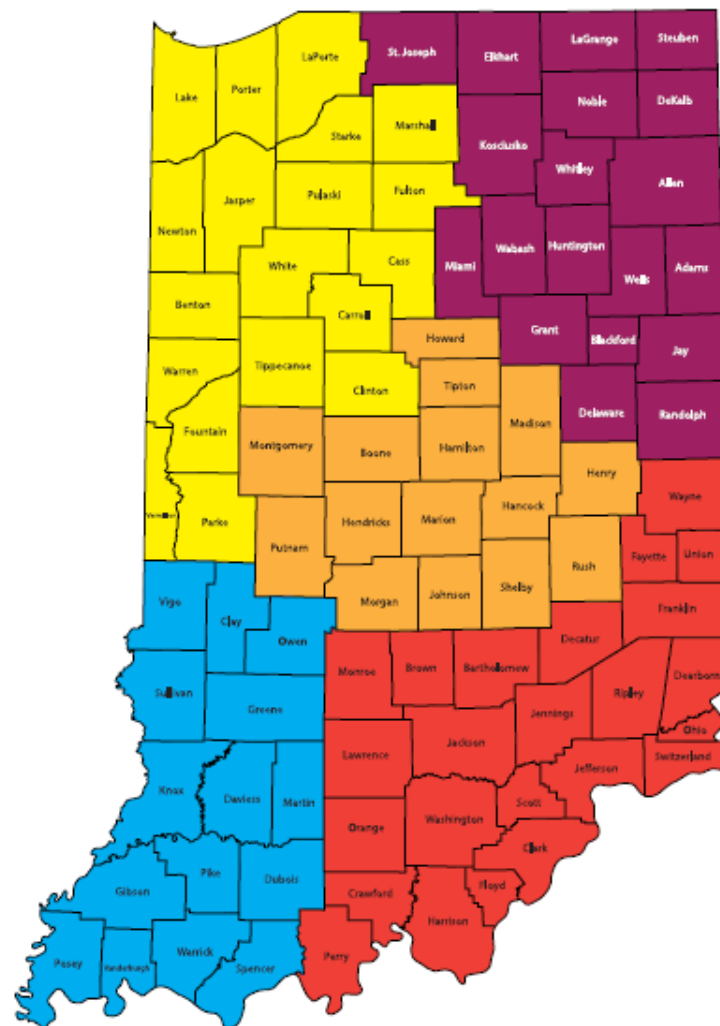
Resources

Territory Map

QUESTIONS?

Session Survey

Please use the QR code or the weblink below to complete a survey about the session you just attended. Each session has a unique survey so be sure to complete the appropriate one for each session you attend. We will be taking your feedback from this survey to improve future IHCP events.

https://tinyurl.com/fssa1006